



Attorney Docket No. 000515-350

Patent

000515-350

RCG/3761

Handwritten signature/initials.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Ewa Kolby Falk

Group Art Unit: 3761

Application No.: 09/991,979

Examiner: KARIN M REICHLE

Filing Date: November 26, 2001

Confirmation No.: 4292

Title: ABSORBENT PRODUCT HAVING ANATOMICALLY SHAPED ELEVATION

REQUEST FOR CONTINUED EXAMINATION
TRANSMITTAL LETTER

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer Number **2 1 8 3 9**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the

☐ \$385.00 (2801) ☒ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. ☐ A. Applicant(s) requests that any previously unentered after final amendments not be entered.
Continued examination is requested based on the enclosed documents identified in item 2 below.

☐ B. Applicant(s) previously submitted the following documents for which continued examination is requested:

☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

☐ Other: _____

2. The following documents are enclosed with this submission:

☐ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement (IDS).

☒ A Petition for Extension of Time.

☐ Other: _____

09/20/2004 HVUONG1-00000029-09991979

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3. ☐ Small entity status is hereby claimed.
☒ No additional claim fee is required.
☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

CLAIMS					
	No. of Claims	Highest No. of Claims Thus Paid For	Extra Claims	Rate	Fee
Basic Application Fee (1001)					\$ 770.00
Total Claims		MINUS =	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims		MINUS =	0	x \$86.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$290.00 (1203)					
Total Fee					\$ 770.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Amendment Fee					\$ 0.00
TOTAL FEE DUE					\$ 770.00

4. ☒ A check in the amount of \$ 770.00 is enclosed for the fee due.
5. ☐ Charge _____ to Deposit Account No. 02-4800 for the fee due.
6. ☐ Charge _____ to credit card. Form PTO-2038 is attached.
7. ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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